



PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

JFW \$

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|--|------------------------|----------------|
| | | Application Number | 10/633,347 |
| | | Filing Date | August 4, 2003 |
| | | First Named Inventor | Lowe |
| | | Art Unit | 3644 |
| | | Examiner Name | Tien Dinh |
| Total Number of Pages in This Submission | | Attorney Docket Number | 10665/2 |

ENCLOSURES (check all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Substitute Specification; Marked-up Version of Substitute Specification Return Receipt Postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|------------|
| Firm or Individual name | Ivan Posey |
| Signature | |
| Date | 05/28/2004 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | |
|-----------------------|------------|
| Typed or printed name | Ivan Posey |
| Signature | |
| Date | 05/28/2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 18

| <i>Complete If Known</i> | |
|--------------------------|----------------|
| Application Number | 10/633,347 |
| Filing Date | August 4, 2003 |
| First Named Inventor | Lowe |
| Examiner Name | Tien Dinh |
| Art Unit | 3644 |
| Attorney Docket No. | 10665/2 |

| METHOD OF PAYMENT (check all that apply) | | | | FEE CALCULATION (continued) | | | |
|--|--|--|--|---|------------------------------------|---|---|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: | | | | 3. ADDITIONAL FEES | | | |
| Deposit Account Number: 502811 Deposit Account Name: Brown Raysman Millstein Felder & Steiner LLP | | | | Large Entity Small Entity | Fee Code Fee (\$) | Fee Code Fee (\$) | Fee Description Fee Paid |
| <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | 1051 130 2051 65 SurchARGE - late filing fee or oath 1052 50 2052 25 SurchARGE - late provisional filing fee or cover sheet. 1053 130 1053 130 Non-English specification 1812 2,520 1812 2,520 For filing a request for reexamination 1804 920* 1804 920* Requesting publication of SIR prior to Examiner action 1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action 1251 110 2251 55 Extension for reply within first month 1252 420 2252 210 Extension for reply within second month 1253 950 2253 475 Extension for reply within third month 1254 1,480 2254 740 Extension for reply within fourth month 1255 2,010 2255 1,005 Extension for reply within fifth month 1401 330 2401 165 Notice of Appeal 1402 330 2402 165 Filing a brief in support of an appeal 1403 290 2403 145 Request for oral hearing 1451 1,510 1451 1,510 Petition to institute a public use proceeding 1452 110 2452 55 Petition to revive - unavoidable 1453 1,330 2453 665 Petition to revive - unintentional 1501 1,330 2501 665 Utility issue fee (or reissue) 1502 480 2502 240 Design issue fee 1503 640 2503 320 Plant issue fee 1460 130 1460 130 Petitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1.17 (q) 1806 180 1806 180 Submission of Information Disclosure Stmt 8021 40 8021 40 Recording each patent assignment per property (times number of properties) 1809 770 2809 385 Filing a submission after final rejection (37 CFR § 1.129(a)) 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) 1801 770 2801 385 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination of a design application Other fee (specify) _____ | | | |
| 1. BASIC FILING FEE | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| Large Entity Small Entity | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| Fee Code Fee (\$) | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| 1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| SUBTOTAL (1) (\$ 0 | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| Total Claims: 22 -20 ** = 2 X 9 = 18 Independent Claims: -3 ** = 0 X 0 = 0 Multiple Dependent: X 0 = 0 | | | | Extra Claims Fee from below Fee Paid | Fee Description Fee Paid | Fee Description Fee Paid | Fee Description Fee Paid |
| Large Entity | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| Fee Code Fee (\$) | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| 1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims over original patent 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| SUBTOTAL (2) (\$ 18 | | | | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid | Fee Code Fee (\$) |
| | | | | Other fee (specify) _____ | Fee Description Fee Paid | Fee Code Fee (\$) | Fee Description Fee Paid |
| | | | | *Reduced by Basic Filing Fee Paid | SUBTOTAL (3) | (\$ 0 | Fee Description Fee Paid |

| SUBMITTED BY | | Complete (if applicable) | | | |
|-------------------|------------|--------------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Ivan Posey | Registration No. (Attorney/Agent) | 43,865 | Telephone | 310-712-8300 |
| Signature | | | | Date | 05/28/2004 |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



PATENT
ATTORNEY DOCKET NO. 10665/2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Lowe et al.

Serial No.: 10/633,347 Examiner: Tien Dinh

Filed: August 4, 2003 Group Art Unit: 3644

Title: FLYING CAMERA AND SENSOR MECHANIZED LIFT
PLATFORM

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

Sir:

This is responsive to the Office action of April 12, 2004. Please amend the above-identified application as follows:

CONTENTS

Amendments To The Specification begin on page 2 of this paper.

Amendments To The Claims begin on page 3 of this paper.

Amendments To The Abstract begin on page 5 of this paper.

Amendments To The Drawings begin on page 6 of this paper.

Remarks begin on page 7 of this paper.

A Conclusion begins on page 12 of this paper.

An Appendix including a clean version of the substitute Specification, a marked up version of the substitute Specification, and amended drawing sheets of Figures 1-3, are attached following page 12 of this paper.

06/02/2004 SDENB0B1 00000042 10633347
18.00 OP
01 FC:2202